

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	203372US2
	First Inventor or Application Identifier	
	Shigeru NEMOTO	
Title		DISPLAY DEVICE FOR A MEDICAL TOMOGRAPHIC IMAGE
Assignee Name:		NEMOTO KYORINDO CO., LTD.
Assignee Address:		27-20, Hongo 2-chome, Bunkyo-ku, Tokyo, Japan

02/21/01

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: Assistant Commissioner for Patent Box Patent Application Washington, DC 20231
JAB 03 U.S. PTO		
Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		
1. <input type="checkbox"/> Specification	Total Sheets	33
2. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets	10
3. <input type="checkbox"/> Oath or Declaration	Total Pages	<input type="text"/>
a. <input type="checkbox"/> Newly executed (original or copy)		
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation / divisional w/ box 17 completed)		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).		
4. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
5. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
a. <input type="checkbox"/> Computer Readable Form (CRF)		
b. Specification or Sequence Listing on:		
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
ii. <input type="checkbox"/> Paper		
c. <input type="checkbox"/> Statements verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS		
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
8. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney	
10. <input type="checkbox"/> English Translation Document (if applicable)		
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations	
12. <input type="checkbox"/> Preliminary Amendment		
13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard		
14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
15. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		
16. <input checked="" type="checkbox"/> Other: Notice of Priority, List of Inventor's Name and Address		

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below.

Continuation Divisional Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

18. Amend the specification by inserting before the first line the sentence:

This application is a Continuation Division Continuation-in-part (CIP)
of application Serial No. Filed on

Which was published in English

Which was not published in English

This application claims priority of provisional application Serial No. Filed on

19. CORRESPONDENCE ADDRESS



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Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:		Date:	2/21/01
Name:	C. Irvin McClelland	Registration No.:	

Registration Number 21,124

Docket No. 203372US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Shigeru NEMOTO

SERIAL NO: New Application

FILING DATE: Herewith

FOR: DISPLAY DEVICE FOR A MEDICAL TOMOGRAPHIC IMAGE

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	16 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	4 - 3 =	1	× \$80 =	\$80.00
■ MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$270.00
■ LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$710.00
			TOTAL OF ABOVE CALCULATIONS	\$1,190.00
■ REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$-595.00
□ FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
□ RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$595.00

Please charge Deposit Account No. 15-0030 in the amount of A duplicate copy of this sheet is enclosed.

A check in the amount of \$595.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.
A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 2/21/01



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Docket No. 203372US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Shigeru NEMOTO

FILING DATE: Herewith

FOR: DISPLAY DEVICE FOR A MEDICAL TOMOGRAPHIC IMAGE

LIST OF INVENTOR'S NAME AND ADDRESS

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

SIR:

Listed below is the name and address of the inventors for the above-identified patent application.

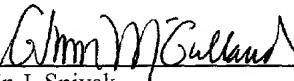
Shigeru NEMOTO

Tokyo, Japan

A declaration containing all the necessary information will be submitted at a later date.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.



Marvin J. Spivak
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